FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden
hours per response.....16.00



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC	USE ONLY	
Prefix	Serial	
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Name of Offering (check if this is an amendment and name has changed, and indicate change.)	SECTION OF THE PROPERTY OF THE
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	N ULDE MAY 0 3 2004
A. BASIC IDENTIFICATION DATA	10 765 TON
Enter the information requested about the issuer	SECT
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
To rbay Holdings, Inc. Address of Executive Offices (Number and Street, City, State, Zip Code) 140 Old Wantry Rock Mincola New Yalk 11501 Address of Principal Business Operations (Number and Street, City, State, Zip Code)	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
140 Old Wentry Road Mineula New York 11501	516-747-5955
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Brief Description of Business Sales of computer mouse hardware and Type of Business Organization	soft were CESSED
Type of Business Organization	PROCESSES
corporation limited partnership, already formed other (p limited partnership, to be formed	MAY 05 2004
Actual or Estimated Date of Incorporation or Organization: Month Year	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	r Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Gommission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20:	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously supply not be filed with the SEC.	
Filing Fee: There is no federal filing fee.	المراجع
State:	» ·
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for st ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S	

this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

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A. BASIC IDENTIFICATION DATA	
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equi Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership iss Each general and managing partner of partnership issuers. 	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Manage	and/or ing Partner
Full Name (Last name first, if individual) Large W. II. am Thomas Business or Residence Address (Number and Street, City, State, Zip Code) 140 011 Contry Road Mincola New York 11501 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General	
Manag	ing Partner
Full Name (Last name first, if individual) 140 Old Contry Road Mineola New Work 11. Business or Residence Address (Number and Street, City, State, Zip Code)	501
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General Manage	and/or ing Partner
Full Name (Last name first, if individual) Morchant homes Business or Residence Address (Number and Street, City, State, Zip Code)	
Business or Residence Address '(Number and Street, City, State, Zip Code) 140 Old Contry Road Mineola New York 1 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General	150)
	and/or ing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manag	and/or ing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director Manage	and/or ring Partner
Full Name (Last name first, if individual)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Business or Residence Address (Number and Street, City, State, Zip Code)

Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply:

Full Name (Last name first, if individual)

☐ Beneficial Owner ☐ Executive Officer ☐ Director

General and/or

Managing Partner

					В. П	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer solo	l, or does th	ne issuer in	ntend to se	ll, to non-a	ccredited i	nvestors in	this offer	ing?		Yes	No.
			,			Appendix				_		ب	/
2.	What is	the minim	um investn			• •						s_1	000
											Yes	No	
3.											Ø		
4.	commis If a pers or state:	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Name (Last name first, if individual)											
Ful	l Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	umber and	d Street, C	ity, State, Z	Lip Code)						
Na	me of As	sociated Br	oker or De	aler				*					
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				·		
	(Check	"All States	" or check	individual	States)							☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if ind	vidual)	, , , , , , , , , , , , , , , , , , , ,		····						
Bu	usiness or Residence Address (Number and Street, City, State, Zip Code)												
Na	me of As	sociated Br	oker or De	aler			· · · · · · · · · · · · · · · · · · ·	****					
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers				٠.		• • • • •
	(Check	"All States	or check	individual	States)	***************************************	•••••	••••••		•••••	***************************************	☐ Al	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)			 			
Na	me of As	sociated Bi	oker or De	aler					<u>-</u>		· · · · · · · · · · · · · · · · · · ·		
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers	1			·		
	(Check	"All States	s" or check	individual	States)		••••••••••	••••••				☐ Al	1 States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	, ,	Aggregate Offering Price	Amount Already Sold
		-	
	Debt Stock	152,603	\$ 73 2 603
			\$
	Common Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify)		
	Total	<u> </u>	\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	2 Z	\$ 152,603
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		· · · · · · · · · · · · · · · · · · ·
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A	,	\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 600
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify) Blue Sky Fees		\$ 1660
	Total		\$ 2260

	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		s 150, 343
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	l	
		Payments to Officers. Directors. & Affiliates	Payments to Others
	Salaries and fees	□ s	
	Purchase of real estate	□ \$	S
	Purchase, rental or leasing and installation of machinery and equipment	s	
	Construction or leasing of plant buildings and facilities	□ \$	
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	m e	
	Repayment of indebtedness		
	Working capital		
	Other (specify):		. []S
		s	
	Column Totals		s
	Total Payments Listed (column totals added)	□ s	
	D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comming information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writte	
10	Bray Holdings, Inc. Signature Large	Date 4 26	DJ
Na V	me of Signer (Print or Type) Title of Signer (Print or Type) NOW TO LANGE VESI DOWN		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	APPENDIX										
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Number of Number of Accredited Non-Accredited				No		
AL											
AK											
AZ											
AR											
CA											
со		*	Wman Stock	/	\$2,500	0	· · · · · · · · · · · · · · · · · · ·				
СТ											
DE				,							
DC			/ char								
FL		X	Comman Stock #5,000 Common Stock	2_	\$10,600	ی			×		
GA		×	\$10,600	3	\$10,600	٥			×		
НІ											
ID											
IL											
IN		ļ , , , , , , , , , , , , , , , , , , ,	1) m= , (to)		<i>H</i>						
IA		X	419,320	4	\$19,320	0	,		×		
KS			Lomin Still		<i>.</i>						
KY		×	\$3.000	/	\$3,000	ð			X		
LA											
ME					ļ						
MD	<u></u>										
MA			Commen Stick	7	\$19,520						
MI		*	Gman Stick	3	5000	0	 		X		
MN		X	\$5000		5000	υ			×		
MS											

APPENDIX 2 3 4 1 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach Type of investor and offering price to non-accredited explanation of offered in state amount purchased in State waiver granted) investors in State (Part B-Item 1) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount **Investors** Amount Yes No MO MT NE NV NH NJ NM #66663 5 NY X U \times NC ND OH OK OR \$9,000 X X PA ٥ RI SC SD # 12,000 \$12,000 χ TN 0 × TXUT VTVAWA WV

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	APPENDIX												
1		2	3		4								
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					Type of investor and explar amount purchased in State waive		(if yes, explan waiver	ate ULOE attach attion of granted) -Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
WY													
PR													

4 6 C